

“EXTEND THE SUBMISSION DUE DATE”

Alive & Thrive: Request for Proposals (RFP)

Issued on: July 7, 2022

For: Alive & Thrive Nigeria Baseline Evaluation

Estimated Period of Activity Performance: August to October 2022

Proposal Deadline: July 29, 2022

INTRODUCTION

Alive & Thrive (A&T) saves lives, prevents illness, and improves the health and wellbeing of mothers, children, and adolescents by using evidence-based approaches in collaboration with governments and other partners at the global, regional, national, and community levels. The initiative is managed by FHI Solutions and funded by the Bill & Melinda Gates Foundation in Nigeria.

Building on a proof-of-concept phase (2009-2014), A&T demonstrated that rapid improvements in infant and young child feeding are possible in diverse settings through strategically planned high-impact interventions. A&T has since expanded its geographic and technical scope, strengthening the integration of maternal infant and young child nutrition (MIYCN) interventions into health, food, and social protection systems in over 19 countries. In Nigeria from 2016 to 2021, A&T strengthened the policy environment for infant and young child feeding (IYCF) at the national and state levels, built the capacity of frontline workers to support IYCF throughout the first 1,000 days period, and sensitized and engaged communities on IYCF practices. By working with national, state, and community actors, interventions helped more than 2,809,686 mothers obtain nutrition counseling from trained frontline workers.

In its second phase of the intervention, A&T will build on the successes and learning realized during the initiative’s first five years. From 2021-2026, A&T is scaling up MIYCN coverage in seven focus states – Kaduna, Kano, Sokoto, Borno, Bauchi, Yobe and Lagos. Working with state governments, it aims to strengthen local capacities and improve the delivery of MIYCN outcomes in the focal states. Further, the initiative strives to improve data management and quality and increase use of data for decision-making and project/program performance management.

A&T NIGERIA

A&T will implement a number of activities in Nigeria to contribute to the achievement of the following five outcomes by the end of this five-year phase:

- Outcome 1: Capacity of GON and key stakeholders to deliver MIYCN services enhanced.
- Outcome 2: MIYCN policies and regulations operationalized at state level.
- Outcome 3: MIYCN services mainstreamed into all key service delivery platforms (ANC, PNC, child health services).
- Outcome 4: Increased demand for MIYCN services.
- Outcome 5: Key learning agenda questions answered and local research capacity enhanced.

A&T’s approach is based on the socio-ecological model that recognizes the influence of family and community as well as policy in changing social norms and behaviors. This approach was successfully executed in 11 states in Nigeria during Phase I of project implementation from 2015 – 2021. Applying this experience, A&T is strategically scaling MIYCN coverage in primary health care facilities in the seven focus states from 2021 - 2026 through the following approaches:

- Designing a comprehensive package of scalable MIYCN interventions to reduce anemia, prevent low birth weight, promote early and exclusive breastfeeding, and reduce wasting and stunting.
- Supporting state government and local organizations to lead and sustain the delivery of MIYCN interventions.
- Working with community-based organizations to engage husbands, influential family members, faith actors and traditional leaders for increased demand for MIYCN services.

PURPOSE AND SCOPE OF THIS RFP

A&T seeks to contract with a qualified organization to design and conduct a baseline evaluation related to the A&T program in seven states of Nigeria: Bauchi, Borno, Kaduna, Kano, Lagos, Sokoto, and Yobe. The overall evaluation will consist of both the baseline and an endline evaluation for this second phase of the five-year initiative (2021 – 2026). This RFP includes evaluation design and data collection for the baseline survey only. The baseline survey will consist of a quantitative, household survey designed to measure key nutrition behaviors among women and children, and maternal, infant, and young child nutrition (MIYCN) knowledge, norms, and perceptions of quality of care among women, including mothers of children 0-23 months.

Objectives

For the baseline, A&T would like to capture baseline values for key nutritional outcome/behavioral indicators, related attitudes and knowledge, and perceptions of the quality of healthcare. Baseline data must be collected in a manner that allows calculation of differences with endline data (to be collected five years from now), allowing A&T to measure changes over time in the initiative's intervention areas. The primary learning question for the evaluation in Nigeria will be: *To what extent have changes in MIYCN knowledge, attitudes, and practices occurred before and after A&T interventions in Bauchi, Borno, Kaduna, Kano, Lagos, Sokoto, and Yobe states?*

Evaluation sites and sample size

The evaluation is to be conducted in Bauchi, Borno, Kaduna, Kano, Lagos, Sokoto, and Yobe states. The A&T approach will eventually be implemented in all LGAs in these states. Applicants should describe how they would select LGAs for the evaluation in their technical proposal.

The sample size needs to be sufficiently powered to detect differences between baseline and endline. We will use exclusive breastfeeding as the indicator to power the sample. This means that a sample of approximately 600 women with children 0-6 months per state must be included as part of the sample. The sample must be population-based and randomized at household level. Applicants must describe how they would prepare sampling frames and design and implement a sampling plan to correspond to these needs.

Outcomes of Interest

Some illustrative outcomes of interest are presented below. These can be adapted and will be finalized with the A&T team once an award is made.

- a. Early breastfeeding practices (exclusive breastfeeding to power the sample, early initiation of breastfeeding).
- b. Women's dietary diversity (W-DD)/ minimum dietary diversity (MDD) for children 6-23 months

- c. Women with a birth in the past five years who took iron tablets or syrup for 90+ days
- d. Micronutrient supplementation for mothers and children (Vit A, micronutrient powders, and multiple micronutrient supplementation)
- e. Women's knowledge of optimal MIYCN behaviors
- f. Positive MIYCN community norms established
- g. Quality of care

Specific tasks in the awarded scope of work may include:

1. *Design a baseline survey (using pre/post design) in seven states of Nigeria.* This will include working with A&T staff to design a feasible and rigorous sampling strategy. This will include developing a sampling plan and all field sampling procedures with tracking forms and monitoring tools. The organization should be able to work with local agencies to obtain appropriate sampling frames for sampling.
2. *Providing input into the study protocol* (to be developed by A&T) and be responsible for obtaining IRB approvals from local IRB in Nigeria.
3. *Collect data according to the agreed upon evaluation design.* Evaluators will also develop, translate, back-translate and pre-test data collection instruments. Evaluators will develop a data management plan and program and validate data entry systems, develop data quality procedures, and clean data while maintaining proper documentation. Data management procedures should ensure data security and confidentiality. The organization will deliver a clean raw data set with dataset documentation and documentation ensuring the integrity of the data. The organization will train enumerators and interviewers, supervise data collection, and provide periodic monitoring reports.
4. *Analyze data and draft reports in English.* Evaluators will develop an analysis plan including tables shells. A&T will review and approve these plans. The organization will conduct the analysis and provide documentation of all analysis steps to allow reproducibility of results. Depending on the final sampling plan, the organization will need to have experience analyzing data from complex sampling designs, including sampling weight construction and adjustments for clustering using appropriate statistical software. Analysis may include the creation of analysis datasets with the creation of analysis variables and data analysis decisions. In addition, the organization will conduct independent analysis validation procedures and document these processes.
5. *Facilitate data interpretation and disseminate evaluation results.* Evaluators will be expected to share results with A&T staff both at headquarters and in Nigeria and facilitate interpretation of results so that they may inform program implementation. We expect evaluation results to be packaged in a slide deck and report for dissemination to varied audiences (donors, policymakers, public health professionals, nutritionists, etc.).

SUBMISSION REQUIREMENTS

To be considered, bidders must provide the following in English (**not to exceed a total of 10 pages**, not including CVs, bios, and examples of past work):

1. A description of the bidder's approach to conducting the household survey in seven states of Nigeria (Bauchi, Borno, Kaduna, Kano, Lagos, Sokoto, and Yobe states). Please propose how

- study sites will be selected, proposed sampling and data collection methods, proposed data management system, proposed analysis approach, and timeline for all activities.
2. A description of the bidder's institutional capacity and experience in the following areas:
 - a. Expertise in global public health, maternal and child health, child survival, and/or nutrition, especially IYCF and or breastfeeding.
 - b. Experience designing and conducting rigorous program evaluations of health and nutrition programs in Nigeria, including experience with development of data collection tools, enumerator training, sampling, developing/conducting data analysis plans, managing IRB processes, and report writing.
 3. A cost proposal in the format provided by FHI 360. **The cost proposal must be broken down by state. Budget must be in Naira.**
 4. Three references for past performance, preferably from Nigeria and other sub-Saharan countries, especially in West Africa, including contact information for each.

As an addendum to the proposal, please include bios and CVs for proposed key personnel and examples of past work.

Cost Proposal:

Please provide a detailed budget that reflects costs for activities included in the proposal in line with the SOW in this RFP. Please also include a **budget narrative** that describes and justifies the cost assumptions for each category and line item in the budget spreadsheet. Please use the budget template provided by FHI. The budget should be broken down by labor costs (please identify personnel who will perform the work), include fringe benefit costs in accordance with the subawardee's compensation policies, travel costs, supplies, any other direct costs necessary to perform a category of work, and indirect costs. Please include funding, if any, received from other sources in pursuit of the proposed activities in the columns provided in the budget template. **All costs should be in Naira.**

If included, indirect costs must be clearly stated including the basis on which they will be applied. Indirect costs are administrative expenses related to overall general operations and are shared among projects and/or functions. Examples include executive oversight, accounting, grants management, legal expenses, utilities, and facility maintenance. In so far as possible, identifiable (allocable) costs should be noted and justified in the proposal as direct costs, including those for dedicated ongoing project management, facilities, and support.

To the extent that indirect costs are applicable, they are subject to the following limits:

- 0% for government agencies and other private foundations
- up to 10% for U.S. universities and U.S. community colleges
- up to 15% for non-government organizations (NGOs), Multilateral Organizations, Non-U.S. Universities and For-profit organizations

If the organization has lower indirect rates, the lower rates should be used.

CRITERIA FOR EVALUATION

Proposals will be evaluated and ranked by a committee with reference to best value as determined using the criteria below.

1. Methodology and evaluation approach (35%)
2. Capacity, experience, and key personnel (25%)
3. Completeness and appropriateness of budget (30%)
4. References and past performance (10%)

CONTRACT MECHANISM

FHI anticipates issuing a fixed price contract to the winning proposal based on best offer (quality/price). The approved contract will include a fixed price payment schedule based on the deliverables described in the scope of work. FHI may issue contracts to multiple bidders.

RESPONSE

Proposals in response to this RFP should be submitted by e-mail to Patience Kwada at pkwada@fhi360.org with copy to Lina Constien at lconstien@fhisolutions.org by **July 29, 2022 at 5:00 PM Abuja, Nigeria time**. FHI will acknowledge receipt of your proposal by return e-mail. Submissions received after this date and time will not be accepted. Proposals must be submitted in electronic format using software compatible with Microsoft Office.

Requests for clarifications/questions on this RFP should be submitted by e-mail to Lina Constien at lconstien@fhisolutions.org with a copy to Patience Kwada at pkwada@fhi360.org by **July 22, 2022 Abuja, Nigeria time**. Responses will be shared with all parties who submitted questions or expressed interest, as well as posted on the website. No questions by phone call will be answered.

WITHDRAWALS OF PROPOSAL

Proposal may be withdrawn by written notice via email received at any time before award.

FALSE STATEMENTS IN OFFER

The bidder must provide full, accurate, and complete information as required by this solicitation. If at any time FHI Solutions determines a bidder has provided false representations in its proposal, FHI Solutions may reject the proposal without further consideration.

Disclaimers:

- FHI may cancel the solicitation and not make an award.
- FHI may reject any or all responses received.
- Issuance of a solicitation does not constitute an award commitment by FHI.
- FHI reserves the right to disqualify any offer based on offeror failure to follow solicitation requirements.
- FHI will not compensate offeror for preparation of their response to this solicitation.
- FHI reserves the right to issue a contract based on the initial evaluation of offers without discussion.
- FHI may choose to award a contract for part of the activities in the RFP.
- FHI may choose to award a contract to more than one vendor for specific parts of the activities in the RFP.

- FHI may request from short-listed offerors a second or third round of either oral presentation or written response to a more specific and detailed scope of work that is based on a general scope of work in the original RFP.
- FHI has the right to rescind an RFP or rescind an award prior to the signing of a contract due to any unforeseen changes in the direction of FHI' client, be it funding or programmatic.
- FHI reserves the right to waive any deviations by offerors from the requirements of this solicitation that in FHI's opinion are considered not to be material defects requiring rejection or disqualification; or where such a waiver will promote increased competition.
- Should FHI choose to make an award, all deliverables produced under said award shall be considered the property of FHI.